

Please type a plus sign (+) inside this box [+]

Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	488-00063	Total Pages	35	
		First Named Inventor or Application Identifier				USPTO
		Norihiko Furuta				22154 U.S. PTO 698239
		Express Mail Label No. EV342894767US				103103
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		6. <input type="checkbox"/> Microfiche Computer Program (Appendix)				
2. <input checked="" type="checkbox"/> Specification [Total Pages 21] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identify of above copies 				
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 8] 		ACCOMPANYING APPLICATION PARTS				
4. Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) <small>[Note Box 5 below]</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))				
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked). The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)				
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: / 		10. <input type="checkbox"/> English Translation Document (if applicable)				
18. CORRESPONDENCE ADDRESS						
NAME	Joseph J. Jochman, Reg. No. 25,058					
	ANDRUS, SCEALES, STARKE & SAWALL, LLP					
ADDRESS	100 East Wisconsin Avenue					
	Suite 1100					
CITY	Milwaukee	STATE	Wisconsin	ZIP CODE	53202-4178	
COUNTRY	U.S.A.	TELEPHONE	(414) 271-7590	FAX	(414) 271-5770	

FEE TRANSMITTAL

Total Amount of Payment (\$ 770.00)

Attorney Docket Number 488-00063

METHOD OF PAYMENT (check one)

FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 01.2000

Deposit Account Name Andrus, Sceales, Starke & Sawall, LLP

Charge any additional fee required under 37 CFR 1.16 and 1.17 Charge the Issue Fee set in 37 CFR 1.18 at the Mailing Of the Notice of Allowance, 37 CFR 1.311(b)

3. Payment Enclosed:

Check Money Order Other

FEE CALCULATION (fees effective 10/01/97)

1. Filing Fee

Large Entity Small Entity

Fee Fee Fee Fee
Code (\$) Code (\$)

101	770	201	385	Utility filing fee	\$770
106	340	206	170	Design filing fee	_____
107	530	207	265	Plant filing fee	_____
108	770	208	385	Reissue filing fee	_____
114	160	214	80	Provisional filing fee	_____

SUBTOTAL (1) (\$ 770.00)

2. Claims Extra Fee from below Fee Paid

Total claims 2 -20= 0 X =
Independent 1 - 3= 0 X =

Claims

Multiple Dependent X =

Claims

Large Entity Small Entity Fee
Fee Fee Fee Description
Code (\$) Code (\$)

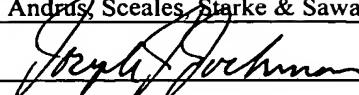
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim
109	82	209	41	Reissue independent claims over original patent
110	22	210	11	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

SUBTOTAL (3) (\$ 0)

*Reduced by Basic Filing Fee Paid

COMPLETE (if applicable)

Type or Printed name	Joseph J. Jochman Andrus, Sceales, Starke & Sawall, LLP		Registration Number	25,058
Signature		Date	10/31/2003	Deposit Account User ID

CERTIFICATE OF EXPRESS MAIL

This is to certify that this correspondence is being deposited with the United States Postal Service as EXPRESS MAIL POST OFFICE TO ADDRESSEE in an envelope addressed to Commissioner of Patents and Trademarks, Washington D.C., 20231 on October 31, 2003. The Express Label is EV342894767US.

Barbara A. Johnson

Name

October 31, 2003

Date

Barbara A. Johnson

Signature

10-31-03

Date